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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/583,028		
	Filing Date	June 15, 2006	
	First Named Inventor	Harue NAKASHIMA et al.	
	Group Art Unit		
	Examiner Name		
Total Number of Pages in This Submission		Attorney Docket Number	0756-7743

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Declaration and Power of Attorney	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Other Enclosures
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	1.
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	2.
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	3.
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> CD, Number of CD(s) _____	4.
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	5.
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-2280 for the above identified docket number.	6.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Eric J. Robinson, Reg. No. 38,285 Robinson Intellectual Property Law Office, P.C. PMB 955 21010 Southbank Street Potomac Falls, VA 20165
Signature	
Date	November 21, 2007

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.			
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Signature		Date	November 21, 2007

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Harue NAKASHIMA et al.

Serial No. 10/583,028

Filed: June 15, 2006

For: CARBAZOLE DERIVATIVE AND
LIGHT EMITTING ELEMENT AND
LIGHT EMITTING DEVICE USING
THE CARBAZOLE DERIVATIVE



) Group Art Unit:

) Examiner:

CERTIFICATE OF MAILING

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Adrian M. Stamps

INFORMATION DISCLOSURE STATEMENT

Honorable Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450


Dear Sir:

In accordance with the provisions of 37 C.F.R. 1.56 and 37 C.F.R. 1.97-1.99, Applicant submits herewith a Form PTO-1449 listing information known to Applicant and requests that this information be made of record in the above identified application. Copies are submitted herewith in accordance with 37 C.F.R. 1.98(a).

This Information Disclosure Statement is being submitted before the issuance of a first Office Action on the merits, therefore, no fee is required.

The Commissioner is hereby authorized to charge fees under 37 C.F.R. §§1.16, 1.17, 1.20(a), 1.20(b), 1.20(c), and 1.20(d) (except the Issue Fee) which may be required now or hereafter, or credit any overpayment to Deposit Account No. 50-2280.

Respectfully submitted,


Eric J. Robinson
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